## Application for License to Operate a Long-term Care Facility

emailed Valid	lation
For Office Use Only Received 10 10 11 Amount	Ch.#
	-110156

	IDENTIFICATION		_			
	Name _	Colonial Manor Care and R	ehabilitation Center			
	Address	2365 Nashville Road •	RECE.			
	City/County/Zip	Bowling Green / Warren / 270-842-1641/ 2873ADM01@s Chris Swihart n began at current addressunks	42101 PECE/			
	Telephone number	270-842-1641/ 2873ADM01@s	unh como <sub>Frice</sub> 2011			
	Administrator	Chris Swihart	OF Wisperson			
	Date facility operatio	n began at current address <u>unk</u>	nown			
	Date facility began o		1/2006			
	TYPE BEDS	No. beds licensed	No. beds requested			
	Skilled	Million below to the second se				
	Nursing Home		Market Control			
	Nursing Facility	48	<u></u>			
	Intermediate Care					
	ICF/MR	***				
	Personal Care					
	CONTROL (check one in each column)					
$\boxtimes$	State County City Private	☑ Profit Nonprofit	Individual Partnership Corporation  L.L.C.			
	OWNERSHIP					
	Name and address of individual owner, partners or corporation. If partnership, list partners.					
		g Green, L.L.C.				
-	101 Sun Avenue, N.E.					
-	Albuquerque, NM 87109					

(OVER)

If facility owned or leased by a corporation, complete the following: Name of corporation HBR Bowling Green, L.L.C. Address of corporation 101 Sun Avenue, N.E., Albuquerque, NM 87109 President or Chairman Thomas B. Emberton Vice President Vacant Secretary Michael T. Berg Treasurer Brandi Riddle Attach a separate sheet listing the names and addresses of each person having at least a twenty-five (25) percent ownership interest in the facility. PLEASE SEE ATTACHMENT A. If owned by a corporation, attach a separate sheet listing the names and addresses of each officer or director of the corporation. PLEASE SEE ATTACHMENT A. If owned by a partnership, attach a separate sheet listing the names and addresses of each partner. N/A. Name and address of parent corporation and/or management company, if applicable. Parent Management Company HBR Kentucky, L.L.C. 101 Sun Avenue, N.E. Albuquerque, NM 87109 I understand that any change in the application that affects my licensure status will be reported to the Office of Inspector General and a new application will be completed at that time. I agree Asst Secretary Glvnis Malcolm

that this facility and all aspects of its operation shall be open at all times to inspection and surveillance by all state agency licensure personnel. I certify that the information given in completing this application is accurate to the best of my knowledge and recognize that falsification of this application can result in denial or revocation of licensure.

Signature of authorized representative

Date

Return Application and fee to:

Office of Inspector General 275 East Main Street, 5E-A Frankfort, Kentucky 40621

Title

OIG 5 (10/2002)

## ATTACHMENT A HBR BOWLING GREEN, L.L.C.

## **Ownership Information**

OWNER	OWNER ADDRESS	OWNERSHIP INTEREST
	101 Sun Avenue, N.E.	100% Ownership Interest in Colonial Manor
HBR Bowling Green, L.L.C.	Albuquerque, NM 87109	Care and Rehabilitation Center

## Officers of HBR BOWLING GREEN, L.L.C.

NAME	ADDRESS/PHONE	TITLE	PERCENT OWN
Thomas B. Emberton	101 Sun Avenue, NE Albuquerque, NM 87109 505-821-3355	President	0%
Vacant	101 Sun Avenue, NE Albuquerque, NM 87109 505-821-3355	Vice President	0%
Brandi Riddle	101 Sun Avenue, NE Albuquerque, NM 87109 505-821-3355	Treasurer	0%
Debbie McLarty	101 Sun Avenue, NE Albuquerque, NM 87109 505-821-3355	Vice President - Reimbursement	0%
Pamela Meyer	101 Sun Avenue, NE Albuquerque, NM 87109 505-821-3355	Assistant Treasurer	0%
Michael T. Berg	101 Sun Avenue, NE Albuquerque, NM 87109 505-821-3355	Secretary	0%
Glynis Malcolm	101 Sun Avenue, NE Albuquerque, NM 87109 505-821-3355	Assistant Secretary	0%

As a Limited Liability Company, HBR Bowling Green, L.L.C. does not have a Board of Directors.